## U.S. Department of Transportation Federal Highway Administration

## EASTERN FEDERAL LANDS HIGHWAY DIVISION

## **BIDDER'S QUALIFICATIONS**

INSTRUCTIONS: Answer all questions on this form inserting "none" or "not applicable" where appropriate. If more space is required attach additional sheets. Return the signed, dated and completed form with the bid to the address shown in the invitation for bids on or before the time set for bid opening. The prospective bidder shall provide any additional information requested by the Government during evaluation of the bids.

If the prospective bidder is a joint venture or general partnership, a separate Bidder's Qualifications form shall be provided individually for each joint venture participant or partner.

1. Project Name: <u>Blue Rid</u>	ge Parkway - 2P14	So	licitation	No.: <b>DTFH71-07-B-0000</b> 2	
2. Name and address of bu	siness:		$\overline{\mathbf{c}}$	ontractor Tax ID	
Company Name	mpany Name			tor DUNS Number	
Street		_			
City	State	Zip Code	Coun	ty	
Telephone Number (Inc	lude Area Code)	Fax Numb	per (Includ	e Area Code)	
E-mail Address		Web site address			
3. a. Type of organization (	(check appropriate bo	x):			
☐ Individual	□ Non-profi	t organization	□ Со	orporation	
□ Partnership □ Joi		t Venture		porated in:	
If a foreign entity:					
☐ Individual	□ Non-profi	t organization	□ Со	rporation	
☐ Partnership	☐ Joint Vent	ture			

b. Size of Business Concern	(check approp	oriate boxes):				
☐ Large Business Concern	□ Small E	Business Concern	☐ Emerging Concern	Small Busine	ess	
☐ Small Disadvantaged Business Concern		n-Owned Small ss Concern	□ SBA 8(a)	Certified SDI	3C	
☐ HUBZone Small Business Concern		n-owned Small ss Concern		Disabled Veter mall Business		
{See FAR Cla	nuses 52.219-1 an	nd 52.219-19 for small b		}		
4. If a joint venture or general p	artnership:					
a. Provide the name under war principal who will represent	which the project sent the compa	ect will be bid, the land with regard to the	home office addr s project if differ	ess, and name ent from "1."	e of the above.	
Deire aire al		<u>TA</u>	X ID:			
Principal		DI	DIG II			
Business Name		<u>DC</u>	JNS#			
Street						
Silver						
City	State Z	ip Code				
b. Provide the name and hor partner is the sponsoring par	ne office addr tner. Attach a	esses of each of the separate sheet for ac	joint venture par lditional partners	tners; indicate	which	
Sponsoring Partner		Other Part	ner		_	
Street		Street			_	
City	State Z	ip Code City		State	ZipCode	
5. Date business established:						
5. Name of succeeded business, if any:						
7. How many years have you be	How many years have you been in business as:					
a. General contractor:	Years. b.	Subcontractor:	Years.			

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8. a. Furnish the following information concerning the owner, partners, officers and directors:

Name	Title	Percent of Business Owned	Years of Business Experience	
			Contracting	Other

- $b. \ Attach\ resumes\ of\ these\ key\ personnel\ as\ well\ as\ the\ on-site\ project\ manager(s)\ and\ superintendent(s), and\ specifically\ identify\ the\ following:$ 
  - -Present position, responsibility, and length of employment.
  - -Amount and type of construction experience.
  - -Amount and type of highway construction experience, including position, responsibility, and a brief project description of each period of employment.
  - -Formal education and training, professional or technical registrations or licenses.

## 9. a. Active Contracts. (Attach additional sheets if necessary)

Project Name and Contract Numbers	Owner's Name & Address Contact Person, Telephone Number, & E-mail address	Scope of Work Performed By Your Company	Contract Amount	Estimated Completion Date	Name of Surety

b. Are there any unresolved claims or lawsuits associated with these projects? If so, state the amount in dispute, parties involved, nature and circumstances of the dispute, and status of the matter on a separate sheet.

10. a. List at least five of the largest jobs you have completed in the last five years which are similar in project work scope to this project. (Attach additional sheets if necessary)

Project Name and Contract Numbers	Owner's Name & Address Contact Person, Telephone Number; & E-mail address	Scope of Work Performed By Your Company	Original and Final Contract Amounts	Original and Final Completion Dates	Names of On-site Project Manager and Superintendent	Name of Surety

b. Are there any unresolved claims or lawsuits associated with these projects? If so, state the amount in dispute, parties involved, nature and circumstances of the dispute, and status of the matter on a separate sheet.

11.	Terr	mination:	
	a. H	Has your firm ever had a contract terminated for any reason?	
		If the answer is yes, identify the project and owner for each termination, and explain the circumstant counding each termination. Attach additional sheet if necessary.	nces
	-		-
12	Deb	parment and Suspension:	
	a. H	Has your firm or any of the principals been suspended or debarred from bidding by any agency?	
		f the answer is yes, identify the agency by which debarred or suspended, and date of reinstatement. itional sheet if necessary.	Attach
	-		-
13.	Wha	at types of work do you perform as general contractor?	-
	-		-
14.	Wha	at types of work do you perform as subcontractor?	-
	-		-
	-		-

. What types of work do you generally subcontract?					
16. Affidavit:  Certification: For the purpose of establishing construction capabilities, we furnish the above as a and correct statement of our construction experience and further certify that all other statements are and correct.					
By (Signature of Authorized Official)	Date				
Title					